

Please type a plus s	sign (+) inside this	bo

UTILITY

PATENT APPLICATION

TRANSMITTAL

Only for new nonprovisional applications under 37 C.F.R. § 1.53(b),

PTO/SB/05 (4/98)
Please type a plus sign (+) inside this box + + Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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Attorney Docket No. AC-001

First Inventor or Application Identifier Cabot, Anthony N.

Title Multiway Poker Game Method and Apparatus

Express Mail Label No. EK175816395US

Δ	APPLICATION ELEMENTS	Assistant Commissioner for Patents ADDRESS TO: Box Patent Application							
	apter 600 concerning utility patent application contents.	ADDRESS TO: Box Patent Application Washington, DC 20231							
I 1 A	Fee Transmittal Form (e.g., PTO/SB/17) ubmit an original and a duplicate for fee processing)	5. Microfiche Computer Program (Appendix)							
2. X Sp	pecification [Total Pages 24]	Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)							
	referred arrangement set forth below) Descriptive title of the Invention	a. Computer Readable Copy							
	Cross References to Related Applications								
1	Statement Regarding Fed sponsored R & D	b. Paper Copy (identical to computer copy)							
	Reference to Microfiche Appendix	c. Statement verifying identity of above copies							
- ₽	Background of the Invention	ACCOMPANYING APPLICATION PARTS							
	Brief Summary of the Invention	7. Assignment Papers (cover sheet & document(s))							
	Brief Description of the Drawings (if filed)	37 C F.R §3.73(b) Statement Power of							
	Detailed Description	8 (when there is an assignee) Attorney							
	Claim(s)	9. English Translation Document (if applicable)							
	Abstract of the Disclosure awing(s) (35 U.S.C. 113) [Total Sheets 6]	10. X Information Disclosure X Copies of IDS Statement (IDS)/PTO-1449 Citations							
4. Oath or 0	Declaration [Total Pages 2]	11. Preliminary Amendment							
а. [a X Newty executed (original or copy) 12 X Return Receipt Postcard (MPEP 503)								
I ь. Г	Copy from a prior application (37 C.F.R. § 1.63	(d)) Small Entity Statement filed in prior conficultion							
 ". ∟	(for continuation/divisional with Box 16 completed)	13. X Statement(s) Status still proper and desired							
	i. DELETION OF INVENTOR(S) Signed statement attached deleting	(PTO/SB/09-12) Certified Copy of Priority Document(s)							
	inventor(s) named in the prior application	1141							
	see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).	15. Other:							
* NOTE FOR ITEM\$ 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT									
IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).									
16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:									
Continuation Divisional Continuation-in-part (CIP) of prior application No:/									
Prior application information: Examiner Group / Art Unit:									
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by									
reference. Ti	he incorporation <u>can only</u> be relied upon when a portion	has been inadvertently omitted from the submitted application parts.							
	17. CORRESPOND	ENCE ADDRESS							
		57							
Custon	ner Number or Bar Code Label (Insert Customer No. or At	or X Correspondence address below							
<u> </u>	(Insert Customer No. or At	iduli Dai Gude Iduei Hele) :							
Name	VICTOR J. GALLO								
Address	P.O. Box 10938								
City	Zephyr Cove State	NV Zip Code 89448							
Country	USA Telephone	(775) 588-3306 Fax (775) 588-3326							
Name (I	PrintType) VICTOR J. GALLO 11	Registration No. (Attorney/Agent) 41,768							
Signatur		Date 9/1/80							
Cignatur	1/16/////65								

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs/of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Complete if Known

PTO/SB/17 (12-98)
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Application Number

FEE TRANSMITTAL

i for F.Y. 1999 i		Filing Date							
Patent fees are subject to annual revision.		First Name		ed Inve	entor Cabot,		Anthony N.		
Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.		Examiner Name						 	
			Group / Art Unit						
TOTAL AMOUNT OF PAYMENT (\$) 345.00	OTAL AMOUNT OF PAYMENT (\$) 345.00			Attorney Docket No.			AC-001		
METHOD OF PAYMENT (check one)	IOD OF PAYMENT (check one) FEE CALCULATION (continued)							1)	
•	3. A	. ADDITIONAL FEES							
The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Deposit	Larg Fee	e Entity	Sma Fee	II Entity		Fee D	escription	Fee Paid	
Account Number	105	130	205	65	Surcha	arge - late fil	ling fee or oath		
Deposit Account Name	127	50	227	25	Surcha cover s		rovisional filing fee o	r	
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37 CFR 1.16 and 1.17			147	•		ng a reques			
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FEE CALCULATION	115	110	215	55			y within first month y within second mont	h	
1. BASIC FILING FEE	116 117	380 870	216 217				within third month		
Large Entity Small Entity Fee Fee Fee Fee Description	ŧ .	1,360					, within fourth month		
Code (\$) Code (\$) Fee Paid	128	1,850	228	925	Extens	ion for reply	within fifth month		
101 760 201 380 Utility filing fee \$345.00	119	300	219		Notice	of Appeal			
107 480 207 240 Plant filing fee	120	300	220	150	Filing a	a brief in sup	oport of an appeal		
108 760 208 380 Reissue filing fee	121	260	221	130	•	st for oral h	_		
114 150 214 75 Provisional filing fee	138	1,510	138 1	1,510			a public use procee	ding	
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				605		ssue fee (oi	unintentional		
2. EXTRA CLAIM FEES	142	1,210 430	242		-	issue fee	100000)		
Extra Claims below Fee Paid Total Claims 20 -20** = 0 X 0.00 = \$0.00	144	580	244		-	ssue fee			
Independent 3 - 3** = 0 x \$0.00 = \$0.00	122	130	122	130	Petition	ns to the Co	mmissioner		
Multiple Dependent	123	50	123	50	Petition	ns related to	provisional applicat	ions	
**or number previously paid, if greater; For Reissues, see below	126	240	126	240	Submis	ssion of Info	ormation Disclosure S	Stmt	
Large Entity Small Entity Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	581	40	581	40			atent assignment per imber of properties)		
103 18 203 9 Claims in excess of 20	146	760	246	380		a submissioi R 1.129(a))	n after final rejection		
102 78 202 39 Independent claims in excess of 3 104 260 204 130 Multiple dependent claim, if not paid	149	760	249	380	For ea	ch additiona	al invention to be		
109 78 209 39 ** Reissue independent claims	Other	faa (an	a aife A		examir	ned (37 CFF	1 1.129(0))		
over original patent 110 18 210 9 ** Reissue claims in excess of 20 and over original patent		fee (sp fee (sp							
SUBTOTAL (2) (\$) 0.00	Redu	ced by	Basic	Filing F	ee Paid	, sı	UBTOTAL (3)	0.00	
SUBMITTED BY Complete (if applicable)									
Typed or Printed Name VICTOR J. GALLO							Reg. Number	41,768	
Signature Vic 916		_		Date	9/1	100	Deposit Account User ID		

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CERTIFICATE OF MAILING UNDER 37 C.F.R. 1.10

Inventors:

Cabot, Anthony N.

Title:

Multiway Poker Game Method and Apparatus

Papers:

- 1. A Utility Patent Application Transmittal Letter Form PTO/SB/05 (1page);
- 2. A Fee Transmittal Form PTO/SB/17 (1 page original and one copy);
- 3. A Patent Application (Utility) (24 pages) including:
 - A Specification (18 pages);
 - 20 Claims (5 pages);
 - An Abstract (1 page).
- 4. 7 Drawing Figures (6 Drawing Sheets);
- 5. A Declaration for Utility Patent Application Form PTO/SB/01 (2 pages);
- 6. A Statement Claiming Small Entity Status (37 CFR 1.9(f) & 1.27(b)) Independent Inventor Form PTO/SB/09 (1 page);
- 7. An Information Disclosure Statement Form PTO/1449 (including 4 citations); and
- 8. A check in the amount of \$345.00 which is to cover the government filing fee for utility patent (small entity).

I hereby certify that the above identified correspondence, which is attached, is being deposited with the United States Postal Express Mail, Post Office to Addressee, mailing label #EK175816395US, in an envelope addressed to:

Assistant Commissioner for Patents

Box Patent Application

Washington DC 20231

on September 1, 2000

Victor J. Gallo

(Signature)

September 1, 2000

(Date of Signature)